Declaration and Power of Attorny Under Patent Cooperation Tready 35 USC §371(c)(4)

As a below named inventor, I hereby declare that:

my residence, post office address and citizenship are as stated below next to my name; that

inven	I verily believe that tor (if plural names are	I am the original named below) o	, first and sole in the invention ent	ventor (if onlitled: L100	y one name is l		r a joint PA MEL
and a	ibed and claimed in the samended onor which I solicit a pate	(if any),	lication number _ the specification a			April 5, 2001 viewed and und	derstand
Of HIV	I acknowledge my dupplication in accordance entor's certificate on the international application	with Title 37, Co	ode of Federal Reg seen filed in any co	ulations, §1.5 ountry foreign	56(a), and that no to the United S	application fo	r natent
	Japanese	Patent Application	on No. 2000-10303	3 filed April 5	2000		
. 13 15			on No. 2000-32658			• •	
) io h er eby	The priority of the all claimed under 35 US tution and revocation to	C 119. I hereby	appoint the follow	wing as my a	ttorneys of reco	rd with full no	ation is ower of
	W. Parkhurst, Reg. No.						41 009
13 1_31	ALL CORRESPONI HURST & WENDEL,	ENCE IN CON	NECTION WITH	THIS APPI	ICATION SHO	THE SEA	TT TO
2805,	TELEPHONE (703) 7	39-0220.	diver bireei	SUITE 210	ALEXANDRIA	i, VIRGINIA	22314-
ĬĪ.	I hereby declare that I	have reviewed o	nd sandometered Abr				-
made l	I hereby declare that I herein of my own know	'ledge are true ar	id that all stateme	nts made on i	nformation and	belief are belief	eved to
be true	; and further that these	statements were r	nade with knowled	ge that willfu	l false statement	s and the like s	o made
are pu	nishable by fine or imposition in the control of th	risonment or both	n. under Section 1	001 of Title 1	18 of the United	States Code a	nd that
3.	Full Name of Sole	my jeopardize in	c variety of the ap	prication or a	any patent issued	u mereon.	
<i>,</i> .	or First Inventor	Tetsuo			FUKA	\ MT	
		Given Name	Middle Ir	itial	Family		
* 4.	Inventor's Signature	- Tersus			Fuka	· hard	
						,	_
	Date of Signature	Nov.	· · · · · · · · · · · · · · · · · · ·	/		200/	
5 .	Residence Morig	Month uchi-shi	D Osaka	ay	TADAN	Year \	PX
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	moruanig cot	J)					

*IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE⊠.

PAGE 2 OF U.S.A. DECLARATION FORM

3 Typewritten Full Name (Second Joint Inventor (if		Katsuhiko		KUMAGAWA	A
		Given Name	Middle Initial	Family Name	
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÷		Given Name	Middle Initial	Family Name	
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Dáte of Signature	Wove.	mber	/	٠.	200/
Į	Month		Day		Year
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Note to Inventors: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5. *This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) f the application to which it pertains.

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B OF U.S.A. DECLARATION FORM this page in a sole inventor application

3 Typewritten Full Name of	W-00	Catachi		ACADA	
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Rotects Joint Inventor (if any) Eighth 4 Inventor's Signature		Given Name	Middle Initial	Family Name	
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i Residence					
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Post Office Address (Insert complete mailing address, including country)					
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Ninth		Given Name	Middle Initial	Family Name	
Inventor's Signature				- w 	
Date of Signature					
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Citizenship					
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^{*}Note to Inventors: Please sign name on line 4 exactly as it appears in line 3 and insert the actual date of signing on line 5.

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